## Assembly Bill No. 1597

assed the Assembly June 1, 2005
Chief Clerk of the Assembly
assed the Senate September 8, 2005
Secretary of the Senate
This bill was received by the Governor this day
f, 2005, at o'clockM
Private Secretary of the Governor

## CHAPTER \_\_\_\_\_

An act to add Chapter 1.5 (commencing with Section 120780) to Part 4 of Division 105 of the Health and Safety Code, relating to drug paraphernalia.

## LEGISLATIVE COUNSEL'S DIGEST

AB 1597, Laird. Drug paraphernalia.

Existing law, with certain exceptions, makes it a misdemeanor for a person to deliver, furnish, transfer, possess with intent to deliver, furnish, transfer, or manufacture with the intent to deliver, furnish, or transfer, drug paraphernalia, knowing, or under circumstances where one reasonably should know, that it will be used to plant, propagate, cultivate, grow, harvest, compound, convert, produce, process, prepare, test, analyze, pack, repack, store, contain, conceal, inject, ingest, inhale, or otherwise introduce into the human body a controlled substance. Existing law provides an exception to this general rule by authorizing a public entity, its agents, or employees to distribute hypodermic needles or syringes to participants in clean needle and syringe exchange projects authorized by the public entity pursuant to a declaration of a local emergency due to the existence of a critical local public health crisis.

This bill would authorize a public entity that receives General Fund money from the State Department of Health Services for HIV prevention and education to use that money to support clean needle and syringe exchange projects authorized by the public entity. The bill would authorize the money to be used for the purchase of sterile hypodermic needles and syringes. The bill would require funds allocated for that purpose to be based upon epidemiological data as reported by the health jurisdiction in its local HIV prevention plan submitted to the Office of AIDS.

The people of the State of California do enact as follows:

SECTION 1. The Legislature finds and declares all of the following:

(a) The continuing spread of the acquired immunodeficiency syndrome (AIDS) epidemic and the spread of blood-borne

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hepatitis pose two of the gravest public health threats in California.

- (b) Injection drug users are the second largest group at risk of becoming infected with the human immunodeficiency virus (HIV) and developing AIDS, and they have been the primary source of heterosexual, female, and perinatal transmission in California, the United States, and Europe.
- (c) According to the Office of AIDS within the State Department of Health Services, injection drug use continues to be one of the most prevalent risk factors for new HIV and AIDS cases in California. Injection drug users continue to be at high risk of HIV/AIDS and hepatitis infection in California. According to an annual report issued by the Office of AIDS, sharing of contaminated syringes and other injection equipment is linked to 20 percent of all reported AIDS cases in the state through 2003. State data suggests that over 1,500 new syringe-sharing HIV infections occur annually. The U.S. Centers for Disease Control and Prevention (CDC) estimates that it costs between one hundred fifty-four thousand dollars (\$154,000) and one hundred ninety-six thousand dollars (\$196,000) to provide a lifetime of care for a person infected with HIV.
- (d) Injection drug users are also highly likely to become infected with hepatitis as a result of hypodermic needle and syringe sharing practices.
- (e) The Legislature has responded to the spread of HIV and hepatitis among injection drug users by adopting Assembly Bill 136 (Chapter 762, Statutes of 1999), which permits localities to determine whether or not to operate clean needle and syringe exchange programs. As a result of that legislation, many localities are now operating these programs.
- (f) These programs have been shown to significantly reduce the transmission of HIV and hepatitis among injection drug users, their sexual partners, and children. Moreover, these programs have been effective in moving individuals into substance abuse treatment programs and in reducing the number of used hypodermic needles and syringes disposed of in public places, which pose a threat to public health and safety.
- (g) The United States government prohibits the use of federal funds to support the purchase of sterile hypodermic needles and syringes by clean needle and syringe exchange programs, and the

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state has not heretofore permitted the use of its funds for the purchase of sterile hypodermic needles and syringes, although current state policy allows state HIV prevention and education funds to be used for costs associated with authorized clean needle and syringe exchange programs, except for the purchase of sterile hypodermic needles and syringes.

- (h) The ability of clean needle and syringe exchange programs to purchase an adequate supply of sterile hypodermic needles and syringes is essential to California's ability to further reduce the transmission of HIV and hepatitis and to relieve the public cost for the care and treatment of HIV disease and hepatitis.
- SEC. 2. Chapter 1.5 (commencing with Section 120780) is added to Part 4 of Division 105 of the Health and Safety Code, to read:

## Chapter 1.5. State HIV Prevention and Education Funds

120780. A public entity that receives General Fund money from the State Department of Health Services for HIV prevention and education may use that money to support clean needle and syringe exchange projects authorized by the public entity pursuant to existing law. The money may be used for, but is not limited to, the purchase of sterile hypodermic needles and syringes. Funds allocated for the purchase of sterile hypodermic needles and syringes shall be based upon epidemiological data as reported by the health jurisdiction in its local HIV prevention plan submitted to the Office of AIDS within the State Department of Health Services.

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Approved	
	Governor